



## TOWN COUNCIL – AGENDA REQUEST FORM

THIS FORM WILL BECOME PART OF THE BACKGROUND INFORMATION USED BY THE COUNCIL AND PUBLIC

Please submit Agenda Request Form, **including back up information**, 8 days prior to the requested meeting date. **Public Hearing requests must be submitted 20 days prior to requested meeting date to meet publication deadlines** (exceptions may be authorized by the Town Manager, Chairman/Vice Chair).

### MEETING INFORMATION

Date Submitted: January 21, 2016

Date of Meeting: January 28, 2016

Submitted by: Town Manager Eileen Cabanel

Department:

Time Required: 30 minutes

Speakers:

Background Info. Supplied: Yes: ☐ No: ☒

### CATEGORY OF BUSINESS (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)

Appointment:	<input type="checkbox"/>	Recognition/Resignation/Retirement:	<input type="checkbox"/>
<b>Public Hearing:</b>	<input type="checkbox"/>	Old Business:	<input type="checkbox"/>
New Business:	<input checked="" type="checkbox"/>	Consent Agenda:	<input type="checkbox"/>
Nonpublic:	<input type="checkbox"/>	Other:	<input type="checkbox"/>

### TITLE OF ITEM

Ratification of Tentative Collective Bargaining Agreement(s)

### DESCRIPTION OF ITEM

Town Council to consider ratification of tentative bargaining agreement(s).

### REFERENCE (IF KNOWN)

RSA:

Warrant Article:

Charter Article:

Town Meeting:

Other:

N/A

### EQUIPMENT REQUIRED (PLEASE PLACE AN "X" IN THE APPROPRIATE BOX)

Projector:	<input type="checkbox"/>	Grant Requirements:	<input type="checkbox"/>
Easel:	<input type="checkbox"/>	Joint Meeting:	<input type="checkbox"/>
Special Seating:	<input type="checkbox"/>	Other:	<input type="checkbox"/>
Laptop:	<input type="checkbox"/>	None:	<input type="checkbox"/>

### CONTACT INFORMATION

Name: **Eileen Cabanel**

Address

**6 Baboosic Lake Road**

Phone Number **424-2331**

Email Address

**ecabanel@merrimacknh.gov**

### APPROVAL

Town Manager: Yes ☒ No: ☐ Chair/Vice Chair: Yes ☐ No: ☐

Hold for Meeting Date: \_\_\_\_\_